

# PERSONAL FINANCIAL STATEMENT

# FORM PFS - LOCAL

## COVER SHEET PAGE 1

Filed in accordance with chapter 572 of the Government Code.  
For filings required in 2019, covering calendar year ending December 31, 2018.  
Use FORM PFS-INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

10

Filer ID:

1 NAME		TITLE: FIRST; MI <i>Mr. Jesse L</i> NICKNAME; LAST; SUFFIX <i>Davis</i>	OFFICE USE ONLY
2 ADDRESS		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>Po Box 2671 Denton, TX 76202</i>	Date Received  <i>10 MAR 07 2019</i>
3 TELEPHONE NUMBER		AREA CODE      PHONE NUMBER; EXTENSION <i>(817) 253-1132</i>	Date Processed  Date Imaged
4 REASON FOR FILING STATEMENT		<input checked="" type="checkbox"/> CANDIDATE <i>Denton City Council, District 3</i> (INDICATE OFFICE)  <input type="checkbox"/> ELECTED OFFICER _____ (INDICATE OFFICE)  <input type="checkbox"/> OTHER _____ (INDICATE POSITION)	

5 Family members whose financial activity you are reporting (see instructions).

SPOUSE *Diana Davis*

DEPENDENT CHILD 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

# PERSONAL FINANCIAL STATEMENT

COVER SHEET  
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. *If you place a check in a box, do NOT include pages for that Part in the report.*

## 6 PARTS NOT APPLICABLE TO FILER

- N/A Part 1A - Sources of Occupational Income
- N/A Part 1B - Retainers
- N/A Part 2 - Stock
- N/A Part 3 - Bonds, Notes & Other Commercial Paper
- N/A Part 4 - Mutual Funds
- N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- N/A Part 6 - Personal Notes and Lease Agreements
- N/A Part 7A - Interests in Real Property
- N/A Part 7B - Interests in Business Entities
- N/A Part 8 - Gifts
- N/A Part 9 - Trust Income
- N/A Part 10A - Blind Trusts
- N/A Part 10B - Trustee Statement
- N/A Part 11A - Ownership of Business Associations
- N/A Part 11B - Assets of Business Associations
- N/A Part 11C - Liabilities of Business Associations
- N/A Part 12 - Boards and Executive Positions
- N/A Part 13 - Expenses Accepted Under Honorarium Exception
- N/A Part 14 - Interest in Business in Common with Lobbyist
- N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- N/A Part 16 - Representation by Legislator Before State Agency
- N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- N/A Part 18 - Legislative Continuances
- N/A Part 19 - Contracts with Governmental Entity
- N/A Part 20 - Bond Counsel Fees Paid to Legislator

## SOURCES OF OCCUPATIONAL INCOME

## PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO		<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT		NAME AND ADDRESS OF EMPLOYER / POSITION HELD		
<input checked="" type="checkbox"/> EMPLOYED BY ANOTHER		Denton County / Assistant District Attorney 110 W. Hickory Denton, TX 76201		
<input type="checkbox"/> SELF-EMPLOYED		NATURE OF OCCUPATION Attorney / Prosecutor		
INFORMATION RELATES TO		<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT		NAME AND ADDRESS OF EMPLOYER / POSITION HELD		
<input checked="" type="checkbox"/> EMPLOYED BY ANOTHER		Denton ISD / PE Aide 1307 N. Locust Denton, TX 76201		
<input type="checkbox"/> SELF-EMPLOYED		NATURE OF OCCUPATION Elementary Educator		
INFORMATION RELATES TO		<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT		NAME AND ADDRESS OF EMPLOYER / POSITION HELD		
<input type="checkbox"/> EMPLOYED BY ANOTHER		/		
<input type="checkbox"/> SELF-EMPLOYED		NATURE OF OCCUPATION		

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

## MUTUAL FUNDS

## PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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1 MUTUAL FUND	NAME <i>Vanguard Target Retirement 2045 Institutional</i>			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input checked="" type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	NAME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

## INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1</b> SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS <i>Rental Income - Attached Apartment</i>  <i>Denton, TX 76201</i>			
<b>2</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>3</b> AMOUNT	<input type="checkbox"/> \$500-\$4,999	<input checked="" type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation				
RECEIVED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	<input type="checkbox"/> \$500-\$4,999	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation				
RECEIVED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	<input type="checkbox"/> \$500-\$4,999	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE

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## PERSONAL NOTES AND LEASE AGREEMENTS

## PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Green SKy Financial - Home Improvement Loan			
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 GUARANTOR				
4 AMOUNT	<input type="checkbox"/> \$1,000-\$4,999	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input checked="" type="checkbox"/> \$25,000-OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lending Club (paid in full in 2018)			
LIABILITY OF	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR				
AMOUNT	<input type="checkbox"/> \$1,000-\$4,999	<input type="checkbox"/> \$5,000-\$9,999	<input checked="" type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Prosper Loans (paid in full in 2018)			
LIABILITY OF	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR				
AMOUNT	<input type="checkbox"/> \$1,000-\$4,999	<input checked="" type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE

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## PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS—INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	sofi Loans (paid in full in 2018)			
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 GUARANTOR				
4 AMOUNT	<input type="checkbox"/> \$1,000--\$4,999	<input checked="" type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT				
LIABILITY OF	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR				
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT				
LIABILITY OF	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR				
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

# INTERESTS IN REAL PROPERTY

## PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS—INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE [REDACTED], Denton, TX 76201
3 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 Lot, Denton County
4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	Jesse Davis Diana Davis
5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD
STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

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## BOARDS AND EXECUTIVE POSITIONS

## PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

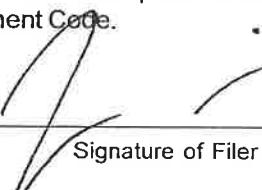
<sup>1</sup> ORGANIZATION	St. David of Wales Episcopal Church		
<sup>2</sup> POSITION HELD	Vestry (Board) member, Senior Warden (ended Jan. 2019)		
<sup>3</sup> POSITION HELD BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	North Texas Metroplex Children's Choir		
POSITION HELD	Board Chair		
POSITION HELD BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Denton Evening Rotary Club		
POSITION HELD	President, July 2018 - June 2019		
POSITION HELD BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____

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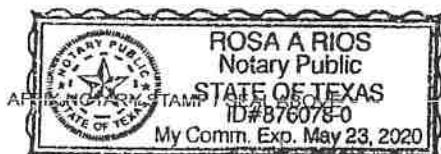
## PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.



Signature of Filer



Sworn to and subscribed before me, by the said Jesse Davis, this the 7<sup>th</sup> day of March, 20 19, to certify which, witness my hand and seal of office.

Rosa A. Rios  
Signature of officer administering oath

Rosa A. Rios  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath